

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	<i>68904</i>	<i>2/8/00</i>
O.I.P.E. CLASSIFIER	<i>W</i>	<i>49</i>	<i>2/24/00</i>
FORMALITY REVIEW	<i>W</i>	<i>71531</i>	<i>3-24-00</i>
RESPONSE FORMALITY REVIEW	<i>W</i>	<i>71531</i>	<i>6-13-00</i>

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

APPLICANTS

TITLE

INT

sub  
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of

Form  
(Rev)

Claim	Final	Original	Date
1	✓	✓	6-5-07
2	✓	✓	12-12-07
3	✓	✓	4-11-04
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here

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